

TOP TEN FEDERAL DEFICIENCIES FOR ASC CERTIFICATION:  
(01-01-05 through 12-31-05)

- |     |              |                                |
|-----|--------------|--------------------------------|
| 1.  | 416.43       | Evaluation of Quality          |
| 2.  | 416.42(a)    | Anesthetic Risk and Evaluation |
| 3.  | 416.46(a)    | Organization and Staffing      |
| 4.  | 416.42(c)    | Discharge                      |
| 5.  | 416.47(b)    | Form and Content of Record     |
| 6.  | 416.41       | Governing Body and Management  |
| 7.  | 416.44(a)(1) | Physical Environment           |
| 8.  | 416.44(a)    | Physical Environment           |
| 9.  | 416.48(a)    | Administration of Drugs        |
| 10. | 416.44(c)    | Emergency Equipment            |

416.43

The ambulatory surgical center, with the active participation of the medical staff, must conduct an ongoing, comprehensive self-assessment of the quality of care provided, including medical necessity of procedures performed and appropriateness of care, and use findings, when appropriate, in the revision of center policies and consideration of clinical privileges.

416.42(a)

A physician must examine the patient immediately before surgery to evaluate the risk of anesthesia and of the procedure to be performed. Before discharge from the ambulatory surgical center, each patient must be evaluated by a physician for proper anesthesia recovery.

416.46(a)

Patient care responsibilities must be delineated for all nursing service personnel. Nursing services must be provided in accordance with recognized standards of practice. There must be a registered nurse available for emergency treatment whenever there is a patient in the ambulatory surgical center.

416.42(c)

All patients are discharged in the company of a responsible adult, except those exempted by the attending physician.

416.47(b)

The ambulatory surgical center must maintain a medical record for each patient. Every record must be accurate, legible, and promptly completed. Medical records must include at least the following:

- o Patient identification
- o Significant medical history and results of physical examination
- o Pre-operative diagnostic studies (entered before surgery), if performed
- o Findings and techniques of the operation, including a pathologist's report on all tissues removed during surgery, except those exempted by the governing body.
- o Any allergies and abnormal drug reactions
- o Entries related to anesthesia administration
- o Documentation of properly executed informed patient consent
- o Discharge diagnosis.

416.41

The ambulatory surgical center must have a governing body that assumes full legal responsibility for determining, implementing, and monitoring policies governing the center's total operation and for ensuring that these policies are administered so as to provide quality health care in a safe environment. When services are provided through a contract with an outside resource, the center must assure that these services are provided in a safe and effective manner.

416.44(a)(1)

Each operating room must be designed and equipped so that the types of surgery conducted can be performed in a manner that protects the lives and assures the physical safety of all individuals in the area.

416.44(a)

The ambulatory surgical center must provide a functional and sanitary environment for the provision of surgical services.

416.48(a)

Drugs must be prepared and administered according to established policies and acceptable standards of practice.

416.44(c)

Emergency equipment available to the operating rooms must include at least the following:

- o Emergency call system.
- o Oxygen.
- o Mechanical ventilatory assistance equipment including airways, manual breathing bag, and ventilator.
- o Cardiac defibrillator.
- o Cardiac monitoring equipment.
- o Tracheostomy set.
- o Laryngoscopes and endotracheal tubes.
- o Suction equipment.
- o Emergency medical equipment and supplies specified by the medical staff.